

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2008</h3>		<b>Complete if Known</b> Application Number: 10/517,114-Conf. #3129 Filing Date: December 3, 2004 First Named Inventor: Vicau Tang Examiner Name: W. G. Trost Art Unit: 2618 Attorney Docket No.: 09669/041001	
<input type="checkbox"/> Applicant cia <input type="checkbox"/> all entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT: (\$) 120.00			

<b>METHOD OF PAYMENT (check all that apply)</b> <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____			
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 50-0591		Deposit Account Name: Osha - Liang LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)			
<input type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

<b>2. EXCESS CLAIM FEES</b> <b>Fee Description</b>		Small Entity Fee (\$)
Each claim over 20 (including Reissues)		50
Each independent claim over 3 (including Reissues)		210
Multiple dependent claims		370
Total Claims: 12    Extra Claims: -20 =    Fee (\$): x    Fee Paid (\$): _____		Multiple Dependent Claims Fee (\$):    Fee Paid (\$): _____
HP = highest number of total claims paid for, if greater than 20. Indep. Claims: 4    Extra Claims: -4 =    Fee (\$): x    Fee Paid (\$): _____		
HP = highest number of independent claims paid for, if greater than 3.		

<b>3. APPLICATION SIZE FEE</b> If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)
_____	- 100 = _____	/50 = _____	(round up to a whole number) x _____ = _____
<b>4. OTHER FEE(S)</b> Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month    120.00			

<b>SUBMITTED BY</b>			
Signature	154 \$45,079	Registration No. (Attorney/Agent)	33,986
Name (Print/Type)	Jonathan P. Osha	Telephone	(713) 228-8600
	THOMAS SCHUBER	Date	October 8, 2007